

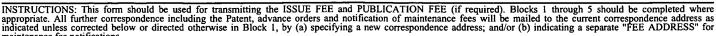
PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000



2292 7.	CE ADDRESS (Note: Use Block 1 for 590 07/26/2004	any change of address)		Fee(s) Trans papers. Each	mittal. Thi additiona	mailing can only be used for secrificate cannot be used a lapaper, such as an assignment of mailing or transmission.	for any other accompanying
BIRCH STEWA PO BOX 747 FALLS CHURCH	RT KOLASCH & BI , VA 22040-0747	IRCH C	m 252004	I hereby cert States Postal addressed to transmitted to	Cer ify that th Service we the Mail o the USP	tificate of Mailing or Trans is Fee(s) Transmittal is being vith sufficient postage for fir Stop ISSUE FEE address TO (703) 746-4000, on the co	smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
		۳ م	.U1 -				(Depositor's name)
		Z.	<i>y</i> n<	§			(Signature)
		~	TRADEMAT				(Date)
APPLICATION NO.	FILING DATE	FIRST NAME		ED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/913,444	08/15/2001		Koichi	Ito		0425-0847P	9635
TITLE OF INVENTION: H	IETERODIAZINONE DERI	VATIVES		10/26/2004	SZEWDIE	2 00000027 09913444	
			·	01 FC:1501 02 FC:8001		1370.0 12.0	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330)	\$0		\$1330	10/26/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS		1,3-10	
KIFLE, BRUCK		1624		514-222500		,	
. Change of correspondence (FR 1.363).	ce address or indication of "F	ee Address" (37	,	ng on the patent fro	nt page, lis	Birch,	Stewart, Kolas
☐ Change of correspond Address form PTO/SB/1☐ "Fee Address" indicat:	ion (or "Fee Address" Indica	tion form	or agents OR (2) the name registered at	es of up to 3 regist c, alternatively, e of a single firm (h torney or agent) an	aving as a	member a 2es of up to	ch, LLP
☐ Change of correspond Address form PTO/SB/1☐ "Fee Address" indicat:	22) attached.	tion form	or agents OR (2) the name registered at 2 registered	k, alternatively, of a single firm (h	aving as a	member a 2es of up to	
☐ Change of correspond Address form PTO/SB/I ☐ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B	tion form e of a Customer E PRINTED ON T	or agents OR (2) the name registered att 2 registered listed, no nar THE PATENT (t, alternatively, to f a single firm (h torney or agent) an patent attorneys or me will be printed. print or type)	aving as a d the nam agents. If	member a 2es of up to no name is 3	
☐ Change of correspond Address form PTO/SB/I ☐ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	22) attached. ion (or "Fee Address" Indica or more recent) attached. Use	tion form e of a Customer E PRINTED ON T	or agents OR (2) the name registered att 2 registered listed, no nar THE PATENT (t, alternatively, to f a single firm (h torney or agent) an patent attorneys or me will be printed. print or type)	aving as a d the nam agents. If	member a 2es of up to no name is 3	
☐ Change of correspond Address form PTO/SB/I ☐ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B s an assignee is identified ben 37 CFR 3.11. Completion	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOI	or agents OR (2) the name registered at 2 registered listed, no nar THE PATENT (in data will appea IT a substitute for	t, alternatively, to f a single firm (h torney or agent) an patent attorneys or me will be printed. print or type)	aving as a d the nam- agents. If an assign- ent.	member a 2es of up to no name is 3ee is identified below, the d	
□ Change of correspond Address form PTO/SB/I □ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B s an assignee is identified ben 37 CFR 3.11. Completion	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOI	or agents OR (2) the name registered at 2 registered listed, no nar THE PATENT (data will appea T a substitute for the part of the part	t, alternatively, of a single firm (h torney or agent) an patent attorneys or me will be printed. print or type) r on the patent. If r filing an assignment	aving as a d the nam- agents. If an assign- ent.	member a 2es of up to no name is 3ee is identified below, the d	
□ Change of correspond Address form PTO/SB/1 □ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co.,	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B s an assignee is identified ben 37 CFR 3.11. Completion	tion form e of a Customer EE PRINTED ON T elow, no assignee of this form is NOT	or agents OR (2) the name registered at 2 registered listed, no nar THE PATENT (in data will appea of a substitute for the patents of the p	t, alternatively, of a single firm (horney or agent) an patent attorneys or me will be printed. print or type) or on the patent. If or filing an assignment (CITY and STAT.	aving as a d the nam agents. If an assignent.	member a 2es of up to no name is 3ee is identified below, the d	locument has been filed fo
□ Change of correspond Address form PTO/SB/1 □ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co.,	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE Ltd. e assignee category or category.	tion form e of a Customer E PRINTED ON T elow, no assignee of of this form is NOI (B)	or agents OR (2) the name registered at 2 registered listed, no nar THE PATENT (in data will appea of a substitute for the patents of the p	a, alternatively, of a single firm (horney or agent) an patent attorneys or me will be printed. print or type) or on the patent. If r filing an assignment (CITY and STAT) Japan ent); individ	aving as a d the nam agents. If an assignent.	member a 2es of up to no name is 3ee is identified below, the duntity)	locument has been filed fo
□ Change of correspond Address form PTO/SB/1 □ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co.,	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE Ltd. e assignee category or category.	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOT (B) tries (will not be pri	or agents OR (2) the name registered at 2 registered listed, no nar THE PATENT (data will appear a substitute for particular a substitute for the particular on the pattern of Payment of Fe	a, alternatively, of a single firm (horney or agent) an patent attorneys or me will be printed. print or type) or on the patent. If r filing an assignment (CITY and STAT) Japan ent); individ	aving as a d the namagents. If an assignment.	member a 2es of up to no name is 3ee is identified below, the duntified below the duntified below the du	locument has been filed fo
□ Change of correspond Address form PTO/SB/1 □ "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co., lease check the appropriate a. The following fee(s) are SE Issue Fee □ Publication Fee (No server)	22) attached. ion (or "Fee Address" Indicator more recent) attached. Using the properties of the prope	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOT (B) writes (will not be pri 4b X d)	Tokyo To	at, alternatively, of a single firm (heromey or agent) an patent attorneys or me will be printed. print or type) or on the patent. If refiling an assignment (CITY and STATE), Japan ent); individuels: the amount of the fecredit card. Form F	aving as a d the nam agents. If an assignment. E OR COU	member a 2es of up to no name is 3ee is identified below, the duffer of the state of th	locument has been filed for
Change of correspond Address form PTO/SB/1 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co., lease check the appropriate a. The following fee(s) are	22) attached. ion (or "Fee Address" Indicator more recent) attached. Using the properties of the prope	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOT (B) writes (will not be pri 4b X d)	Tokyo To	t, alternatively, of a single firm (herrory or agent) an patent attorneys or me will be printed. print or type) or on the patent. If r filing an assignment (CITY and STAT. D, Japan ent); individue(s): the amount of the fecredit card. Form For is hereby authority.	aving as a d the nam agents. If an assignment. E OR COU	member a 2es of up to no name is 3ee is identified below, the duffer or other private grant or other p	locument has been filed for
Change of correspond Address form PTO/SB/1 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co., lease check the appropriate a. The following fee(s) are XX Issue Fee Publication Fee (No see Name Advance Order - # of Change in Entity Status	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE Ltd. e assignee category or category enclosed: mall entity discount permittees Copies 4 s (from status indicated above	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOT (B) writes (will not be pri 4b X d) X	Tokyo To	t, alternatively, of a single firm (heromey or agent) an patent attorneys or me will be printed. print or type) or on the patent. If r filing an assignment (CITY and STATE), Japan ent); individuels: the amount of the fectoredit card. Form For is hereby authorint Number 0.	aving as a d the nam agents. If an assignment. E OR COU Lual XXC Luce(s) is ence PTO-2038 ized by ch	member a 2es of up to no name is 3ee is identified below, the duffer of the state of t	roup entity government of this form.
Change of correspond Address form PTO/SB/1 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Eisai Co., lease check the appropriate a. The following fee(s) are XX Issue Fee Publication Fee (No see Name Advance Order - # of Change in Entity Status	22) attached. ion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion IEE Ltd. e assignee category or category enclosed: mall entity discount permittees Copies 4	tion form e of a Customer E PRINTED ON T elow, no assignee of this form is NOT (B) writes (will not be pri 4b X d) X	Tokyo To	t, alternatively, of a single firm (heromey or agent) an patent attorneys or me will be printed. print or type) or on the patent. If r filing an assignment (CITY and STATE), Japan ent); individuels: the amount of the fectoredit card. Form For is hereby authorint Number 0.	aving as a d the nam agents. If an assignment. E OR COU Lual XXC Luce(s) is ence PTO-2038 ized by ch	member a 2es of up to no name is 3ee is identified below, the duffer or other private grant or other p	roup entity governme

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)